PATENT APPLICATION FEE DETERMINATION RECO Effective December 8, 2004								Application or Docket Number 10/551070				
CLAIMS AS FILED - PART I  (Column 1) (Column 2)								SMALL ENT	птү	OR	OTHER SMALL	
U.S. NATIONAL STAGE FEES			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		<u> </u>	Column 2)		RATE	FEE	1	RATE	FEE
BASIC FEE			SMALL ENT. = \$ 150		LARG	SE ENT. = \$ 300		BASIC FEE		OR.	BASIC FEE	300
EXAMINATION FEE			Satisfies PCT Article 33(1)- (4) = \$50 / \$ 100			her situations =		EXAM. FEE		"`	EXAM. FEE	
SEARCH FEE			All other situations (ie. No Search Rpt.) = \$ 250 / \$ 500		U.S. Is I			SEARCH FEE			SEARCH FEE	400
FEE FOR EXTRA SPEC. PGS.			minu	s 100 =		/ 50 =		X \$ 125 =			X \$ 250 =	1700
TOTAL CHARGEABLE CLAIMS			// min	us 20 =				X \$ 25 =		OR	X \$ 50 =	
INDEPENDENT CLAIMS			6 mi	nus 3 ≈	ر.	3		X \$ 100 =		OR	X \$ 200 =	(000)
MUL	TIPLE DEPEN	DENT CLAIM PRE	SENT				+\$ 180 =		OR	+ \$ 360 =		
* If the difference in column 1 is less than zero, enter "0" in column 2						lumn 2	•	TOTAL		OR	TOTAL	1500
CLAIMS AS AMENDED - PART II  (Column 1) (Column 2) (Column 3)							SMALL E	OTHER THAN NTITY OR SMALL ENTITY				
AMENDMENT A	9/27/05	CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	• 11	Minus	·· 2	0	= 0		X \$ 25 =		OR	X \$ 50 =	
	Independent	. 6	Minus	*** (	<u></u>	= 0		X \$ 100 =		OR	X \$ 200 =	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM					L	+ \$ 180 =		OR	+ \$ 360 =		
								TOTAL ADDIT. FFF		OR	TOTAL ADDIT. FFF	
		(Column 1)		(Colur	nn 2)	(Column 3)		•				
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUMI PREVIO PAID	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total		Minus	**		E		X \$ 25 =		OR	X \$ 50 =	
	Independent	*	Minus	***		=		X \$ 100 =		OR	X \$ 200 =	
	FIRST PRES	ENTATION OF M	ULTIPLE DEPE	NDENT (	CLAIM			+ \$ 180 =		OR	+ \$ 360 =	
TOTAL ADDIT.  FFF OR TOTAL ADDIT.  FFF												
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than "20", enter "20".  *** If the "Highest Number Previously Paid For" IN THIS SPACE is less than "3", enter "3".  The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.												

FORM PTO-875 (Rev. 02/2005)

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